

ALLOWANCE OF VOUCHERS

I HEREBY CERTIFY THAT EACH OF THE ABOVE LISTED VOUCHERS AND THE INVOICES, OR BILLS ATTACHED THERETO,

ARE TRUE AND CORRECT AND I HAVE AUDITED SAME IN ACCORDANCE WITH IC 5-11-10-1.6.

April 9, 2010



JUDITH C. RHODES
FISCAL OFFICER

WE HAVE EXAMINED THE VOUCHERS LISTED ON THE FOREGOING ACCOUNTS PAYABLE VOUCHER REGISTER, CONSISTING OF

PAGES, AND EXCEPT FOR VOUCHERS NOT ALLOWED AS SHOWN ON THE REGISTER SUCH VOUCHERS ARE HEREBY ALLOWED

IN THE TOTAL AMOUNT OF \$ 400.00 . DATED THIS 9th DAY OF April 2010.

APPROVED BY STATE BOARD OF ACCOUNTS IN 2001 FOR CITY OF WEST LAFAYETTE

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4/09/10
3:26:24

ACCOUNTS PAYABLE VOUCHER REGISTER

BDA45/KATHY
PAGE 1

CITY OF WEST LAFAYETTE

FOR THE PERIOD OF 4/09/10 - 4/09/10

CHECK	VOUCHER	VENDOR NAME	DUE DATE							AMOUNT
PO #	INVOICE NUMBER	DESCRIPTION	FND	PROGRAM	OBJECT	CC	ACCOUNT TITLE	VOUCHER	AMOUNT	ALLOWED
2235	2235	GARY STOCKALL, FLEX ACCOUNT	4/09/10							
		FLEX PLAN		811	811.00	.00	0 FLEXIBLE PLAN MEDICAL	400.00		400.00
		FLEX PLAN MEDICAL					CHECK AMOUNT	400.00		
							PRE-WRITTEN TOTAL	400.00		
							GRAND TOTAL.....	400.00		

4/09/10
3:26:24

FUND SUMMARY

BDA45/KATHY
PAGE 2

CITY OF WEST LAFAYETTE

FUND	DESCRIPTION	VOUCHER TOTAL
811	FLEXIBLE PLAN MEDICAL	400.00
GRAND TOTAL		400.00